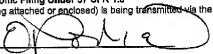


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Charles M. Lieber et al.
Serial No.: 10/588,833
Confirmation No.: 4453
Filed: September 2, 2008
For: NANOSTRUCTURES CONTAINING METAL SEMICONDUCTOR
COMPOUNDS
Examiner: Not Yet Assigned
Art Unit: 2667

Certificate of Electronic Filing Under 37 CFR 1.8	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).	
Dated: March 19, 2009	Signature: 

TRANSMITTAL LETTER

Mail Stop Petition
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Madam:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:


1. Fee Transmittal
2. Preliminary Amendment
3. Petition under 37 C.F.R. §1.78(a)(6) and §1.182
4. Request for Corrected Filing Receipt
5. Filing Receipt with marked up corrections

6. Copies of previously filed Application Data Sheet and Transmittal

Please charge our Credit Card in the amount of \$65.00 covering the required fees. Credit Card Payment Form SB-2038, with a signature from an authorized cardholder, is enclosed. The Director is hereby authorized to charge any deficiency or credit any overpayment in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 23/2825, under Docket No. H0498.70217US02.

Dated: March 19, 2009

Respectfully submitted,

By 
Timothy J. Oyer, Ph.D.
Registration No.: 36,628
Tani Chen, Sc.D.
Registration No.: 52,728
WOLF, GREENFIELD & SACKS, P.C.
Federal Reserve Plaza
600 Atlantic Avenue
Boston, Massachusetts 02210-2206
617.646.8000

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (P.L.R. 4818). <h2 style="margin: 0;">FREE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2009</h3>		Complete if Known	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/588,833-Conf. #4453
		Filing Date	September 2, 2008
		First Named Inventor	Charles M. Lieber
		Examiner Name	Not Yet Assigned
		Art Unit	2667
TOTAL AMOUNT OF PAYMENT		(\$)	1,410.00
		Attorney Docket No.	H0498.70217US02

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>23/2825</u> Deposit Account Name: <u>Wolf, Greenfield & Sacks, P.C.</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

2. EXCESS CLAIM FEES		Small Entity														
Fee Description	Fee (\$)	Fee (\$)														
Each claim over 20 (including Reissues)	52	26														
Each independent claim over 3 (including Reissues)	220	110														
Multiple dependent claims	390	195														
<table style="width: 100%;"> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> <th>Multiple Dependent Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>40</td> <td>- 40 or HP</td> <td>0</td> <td>26.00</td> <td></td> <td></td> <td></td> </tr> </table>		Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)	40	- 40 or HP	0	26.00				
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)										
40	- 40 or HP	0	26.00													
HP = highest number of total claims paid for, if greater than 20.																
<table style="width: 100%;"> <tr> <th>Indep. Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>4</td> <td>- 4 or HP</td> <td>0</td> <td>110.00</td> </tr> </table>		Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	4	- 4 or HP	0	110.00							
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)													
4	- 4 or HP	0	110.00													
HP = highest number of independent claims paid for, if greater than 3.																

3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
<table style="width: 100%;"> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>100</td> <td>- 100 =</td> <td>/50 =</td> <td>(round up to a whole number) x</td> <td></td> </tr> </table>	Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	100	- 100 =	/50 =	(round up to a whole number) x		
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)							
100	- 100 =	/50 =	(round up to a whole number) x								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): _____ Petition to Correct Unintentionally Delayed Benefit Claim _____											
1,410.00											

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	36,628
Name (Print/Type)	Timothy J. O'Connell, P.C.D.	Telephone	617.646.8000
		Date	March 19, 2009

Certificate of Electronic Filing Under 37 CFR 1.8 I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.8(a)(4).	
Dated: March 19, 2009	Signature: